



U.S. Department of Housing and Urban Development

Public and Indian Housing

Special Attention of:

Notice PIH 99-42 (HUD)

HUB Directors, Office of Public Housing;
Program Center Coordinators; Director,
Special Application Center (SAC)

Issued: September 24, 1999

Expires: December 31, 1999

Cross References: NOFA FR-4412

Subject: Rental Assistance for Non-Elderly Persons With Disabilities in Support of Designated Housing Plans - FY 1999 Application Processing Instructions

1. **Purpose.** This Notice provides instructions for reviewing applications and providing funding under the FY 99 Notice of Funding Availability (NOFA) FR-4412 for Rental Assistance for Non-Elderly Persons with Disabilities in Support of Designated Housing Plans published in the Federal Register on March 8, 1999 (hereinafter referred to as the NOFA).
2. **Background.** The Section 8 voucher funding is being made available under this NOFA to provide housing assistance to non-elderly disabled families who would have been housed by a PHA if occupancy in the designated public housing project/building (or portion thereof) were not restricted to elderly households, and assist PHAs that wish to continue to designate their project/buildings (or portions thereof) as "mixed elderly and disabled building" and can demonstrate a need for alternative housing resources for non-elderly disabled families that is consistent with the jurisdiction's Consolidated Plan and the low-income housing needs of the jurisdiction.

In prior fiscal years HUD provided funding for vouchers and certificates for designated housing plans. In FY 1999, however, HUD will be providing vouchers only. This is due to provisions in the Public Housing Reform Act of 1998 that call for the merging of the Section 8 voucher and certificate programs into a new housing choice program. HUD published an interim rule on May 14, 1999, to implement the new voucher program which became effective on August 12, 1999.

No rating or ranking of applications is required since the funds available under the NOFA are not being awarded on a competitive basis. Instead, the Office of Public Housing staff in the local HUD Office will review all applications to determine if they are acceptable (exclusive of the Designated Housing Plan portion of the application - which is reviewed by the Special Application Center) to ensure that they are technically adequate and responsive to the requirements of the NOFA. The Grants Management Center (GMC) will fund all technically adequate applications on a first-come, first-served basis to the extent funds are available.

3. **Application Review Checklist.** Appendix A of this Notice is the Application Review Checklist that the local HUD field offices should use to screen PHA applications for FY 99 Rental Assistance for Non-Elderly Persons With Disabilities in Support of Designated Housing Plans. The checklist is divided into two parts: an initial list of screening criteria

that a PHA's application must pass in order to be eligible for further processing (Part 1), and a list of screening criteria to be used (for reviewing only those applications having passed the initial screening criteria) to determine if a PHA's application is approvable (Part 2).

For purposes of this Notice, the term local HUD Field Office is defined to include the local HUD Field Office HUB and the local HUD Field Office Program Center.

4. **Application Submission Procedures and Due Date.** An original and a copy of the application are to be submitted by the PHA to the local HUD Field Office. Two copies of the application must be submitted concurrently to the Office of Public Housing, Special Applications Center (SAC) in Chicago, IL.
 - a. **Delivered Applications.** The local HUD Field Office HUB, Attention: Director, Office of Public Housing; or local HUD Field Office Program Center, Attention: Program Center Coordinator; are the locations to which PHAs are to submit their applications in response to the NOFA. The deadline for the submission of a delivered application was June 30, 1999, 6 p.m. local HUD Field Office time.
 - b. **Mailed Applications.** Applications will be considered timely if postmarked before midnight on June 30, 1999, and received by the local HUD Field Office HUB or local HUD Field Office Program Center within ten (10) days of the application deadline, i.e., July 10, 1999.
 - c. **Applications Sent by Overnight Delivery.** Overnight delivery items will be considered timely if received by the local HUD Field Office on or before June 30, 1999, or upon submission of documentary evidence that they were placed in transit with the overnight delivery service no later than June 30, 1999.
5. **HUD Reform Act.** The HUD Reform Act requires that HUD make available for public inspection the documentation supporting the approval or disapproval of each application. In addition, the documentation must indicate the basis on which any award was made or denied. Accordingly, reviewers must ensure that their review checklists are appropriately completed and that review comments are adequate to support the points assigned under the four threshold criteria. The local HUD Field Office Director of Public Housing or Program Center Coordinator should ensure that all reviewers within the local HUD Field Office are consistent in their application of this Processing Notice and the requirements of the NOFA.
6. **Review by Office of Fair Housing and Equal Opportunity (FHEO).** FHEO in Headquarters shall provide a list at least annually to the Office of Public and Indian Housing of the names of PHAs that have either received letters of finding of noncompliance with Title VI of the Civil Rights Act of 1964 or Section 504 of the Rehabilitation Act of 1973; have been charged by the Secretary with systemic violations of the Fair Housing Act, or is a defendant in a lawsuit filed by the Department of Justice alleging an ongoing pattern or practice of discrimination. Public Housing staff will compare this list with the list of applicants applying for funding. All applicants appearing on the Civil Rights Threshold List must be referred to FHEO in the local HUD Field Office for a final determination of the applicants' eligibility under the Civil Rights Threshold requirements.

7. **Initial Screening of Applications.** The local HUD Field Office must review the applications at the time they are received. The first step is to complete the initial screening of each application.

The local HUD Field Office's review of a PHA's application must be completed, and the PHA notified in writing of acknowledgment of receipt of the application (Appendix B) and any deficiencies (information either missing or requiring correction) (Appendix C), within 10 calendar days from the date of receipt of the PHA's application. When a deficiency is identified, the local HUD Field Office must fax the signed deficiency letter to the PHA, stating on the cover sheet that the original of the deficiency letter has been mailed to the PHA. The PHA has 14 calendar days from the issuance date of the local HUD Field Office notification letter, to submit the missing or corrected information to that office. If either no information is received, or, information is received by the local HUD Field Office after 3 p.m. local time of the 14th calendar day, the application will be categorized as unacceptable for further processing (rejected).

8. **Review of Applications.**

- a. Part 1 of the Application Review Checklist lists the criteria to be used in the initial screening to determine which applications are eligible for further processing. If the answer to any question in Part 1 is "no," the application is unacceptable for further processing.
- b. Part 2 of the Application Review Checklist is to be used by the local HUD Field Office in further reviewing the contents of those applications which successfully complete the initial screening described in paragraph 7 above.

9. **Notification of Unacceptable Applications.** After the 14th calendar day deficiency correction period, the local HUD Field Office must immediately notify all PHAs whose applications were determined unacceptable for processing. The local HUD Field Office's rejection letter to the PHA must state the basis for this decision.

10. **Information Required on Approvable and Unacceptable Applications.** The local HUD Field Office Grant Administrator (FOGA) for Rental Assistance for Non-Elderly Persons With Disabilities in Support of Designated Housing Plans will receive an electronically transmitted Microsoft EXCEL Master Log and a Rental Assistance for Non-Elderly Persons With Disabilities in Support of Designated Housing Plans Funding Reservation Worksheet file with instructions from Donna Hines, the Management Information Specialist (MIS) for the GMC. By not later than **August 6, 1999**, the local HUD Field Office FOGA was required to transmit, via LOTUS NOTES, both the Master Log and Funding Reservation Worksheet to GMC staff members, Donna Hines and Brenda Earle (Grant Administrator for the Rental assistance for Non-Elderly Persons With Disabilities in Support of Designated Housing Plan). For uniformity, please do not alter the Master Log or the worksheet format.

- a. **Application Master Log.** The Master Log (see sample in Appendix D) will be used to provide the GMC with pertinent applicant data necessary for funding. The Master Log, submitted by the deadline date in paragraph 10 is considered as the final Master Log and should include data on all applications submitted for funding under the NOFA (approvable and unacceptable).

By July 9, 1999, the FOGA was required to transmit to the GMC, via LOTUS NOTES attachment, an initial Master Log of all applications received. Complete only the shaded areas (under the column headings Applicant Name and Units Requested) for the initial Master Log submission. Follow the same procedure for applications postmarked by, but received after the application deadline.

- b. Rental Assistance for Non-Elderly Persons With Disabilities in Support of Designated Housing Plan EXCEL Funding Worksheet. The Rental Assistance for Non-Elderly Persons With Disabilities in Support of Designated Housing Plan Funding Reservation Worksheet (see format in Appendix E) file will be used to calculate the budget authority necessary to fund units for applications determined approvable.
- c. For each approvable application, the following information must be provided:
 - (1) Name and address of PHA;
 - (2) Date and time of the local HUD Field Offices' receipt of the PHA's application;
 - (3) Name of local HUD Field Office, contact person and telephone number;
 - (4) The requested number of vouchers in the PHA application, and the minimum number of vouchers acceptable to the PHA; and
 - (5) A completed fund reservation worksheet for the number Section 8 of vouchers requested in the application.

11. **Application Selection Process.** The Special Application Center was to send to the Grants Management Center by not later than **August 6, 1999** the following information on each designated housing plan submitted in conjunction with the NOFA:

- (1) A copy of the letter to the PHA approving or disapproving its (a) designated housing plan, or (b) updated needs data relative to a previously HUD approved designated housing plan . (See item 3(k) in Part 2 of Appendix A regarding previously HUD-approved designated housing plan.)
- (2) Special Application Center contact person and telephone number

12. **Funding of Applications.**

- a. Applications Recommended for Funding. The Grants Management Center will fund on a first-come, first-served basis all approvable applications from PHAs that are recommended for funding by the local HUD Field Offices and that the Special Application Center advises has an approved designated housing plan, based upon the date and time the application is received in the local HUD Field Office.
- b. Number of Section 8 Units to be Funded. A PHA may apply for only the number of units needed to house those non-elderly disabled families that otherwise would have been housed if not for the designation of a project/building (or portion thereof) for

occupancy by the elderly only. The size of the units applied for must bear a direct relationship to the size of the units designated. PHAs are limited to applying for no more than 200 units.

c. Notifications to Selected and Non-selected PHAs.

- (1) When the list of PHA applications recommended by the local HUD Field Office for funding is approved by PIH, the GMC will prepare and forward: (a) the Congressional Notification letters to Headquarters' Office of Congressional Relations; and (b) the approved list of award recipients, and a sample award and non-award letter to the FOGA via LOTUS NOTES. Upon fund reservation, the GMC will obtain the Congressional notification release date from Headquarters' Office of Congressional Relations and forward this information to FOGA via LOTUS NOTES as well. The award letters must not be sent to the PHAs until the FOGA receives congressional notification release dates from the GMC.
- (2) When Congressional notification is completed and a release date obtained, the FOGA will: (a) provide written notification to all applicants whether or not they have been selected; and (b) send copies of all approval letters to the Section 8 Financial Management Center (S8FMC).

d. Fund Assignment.

- (1) PIH's Budget Division will: (a) assign funds and prepare the Fund Assignment form, HUD-185, for each PHA application approved by PIH for funding; and (b) forward the HUD-185s to the S8FMC.
- (2) The S8FMC will: (a) reserve the funds and notify the local HUD Field Offices of reservations; and (b) contract the funds in HUDCAPS, execute the ACC and forward it to the PHA.

If you have any questions regarding this Notice or the appendices, please contact Brenda Earle in the GMC via LOTUS NOTES or call (202) 358-0221, extension 119.

/s/

Harold Lucas, Assistant Secretary
for Public and Indian Housing

APPENDIX A

APPLICATION REVIEW CHECKLIST

(Applications should be screened at the time they are received)

NAME OF APPLICANT: _____

NAME OF REVIEWER: _____

REVIEWING OFFICE: _____

PART 1

INITIAL SCREENING CRITERIA

(To be completed by Office of Public Housing)

	Yes	No	N/A
1. Application was received before the deadline date (see paragraph 4 of this Notice for deadline date/time for delivered applications, mailed applications, or applications sent by overnight delivery).	~	~	~
2. In reviewing the application, the local HUD Field Office agrees that:			
(a) The PHA has not been charged with a systemic violation of the Fair Housing Act by the Secretary.	~	~	~
(b) The PHA is not the defendant in a Fair Housing Act lawsuit filed by the Department of Justice alleging an ongoing pattern or practice of discrimination.	~	~	~
(c) The PHA has not received a letter of noncompliance findings under Title VI of the Civil Rights Act, section 504 of the Rehabilitation Act, or section 109 of the Housing and Community Development Act. Note: The PHA is not eligible for funding under NOFA FR- 4413 if, prior to the application deadline, the charge, lawsuit, or letter of findings has not been resolved to HUD's satisfaction.	~	~	~
(d) The PHA's application complies with the requirements of 24 CFR 982.102 and NOFA FR-4413 after the expiration of the 14- calendar day technical deficiency correction period.	~	~	~

NAME OF APPLICANT _____

<p style="text-align: center;">PART 1</p> <p style="text-align: center;">INITIAL SCREENING CRITERIA</p> <p style="text-align: center;">(To be completed by Office of Public Housing)</p>		Yes	No	N/A
2.	<p>In reviewing the application, the local HUD Field Office agrees that:</p> <p>(e) The PHA has no serious, unaddressed outstanding, Inspector General audit findings (see section I. (D) of the NOFA), HUD management review findings, or independent public accountant findings for its voucher or certificate programs; and the PHA has achieved a lease-up-rate of at least 90 percent of units in its HUD-approved budget for the PHA fiscal year prior to application for funding in its voucher and certificate programs combined. (See Appendix F for instructions on how to compute the combined certificate and voucher lease-up rate.)</p> <p>Note: Check YES if the PHA is required under the NOFA to apply for vouchers with another PHA, non-profit agency or contractor and that entity has sufficient experience to administer a voucher program.</p>	~	~	~
	<p>(f) The PHA is not involved in litigation that may seriously impede the ability of the PHA to administer Section 8 vouchers.</p>	~	~	~

STOP. If the answer to any of the above questions is "**NO**," then the application is **NOT ACCEPTABLE**. If all above answers are "**YES**," then complete remainder of checklist.

NAME OF APPLICANT _____

PART 2

ADDITIONAL SCREENING CRITERIA

(To be completed by Office of Public Housing)

		YES	NO	N/A	Need Info.
3.	In reviewing the application, the local HUD Field Office agrees that:				
(a)	The application contains a signed, completed form HUD-52515.	~	~	~	~
(b)	The form HUD-52515 specifies the number of vouchers requested (not exceeding 200).	~	~	~	~
(c)	The form HUD-52515 indicates by number of bedrooms the total number of vouchers requested by the PHA.	~	~	~	~
(d)	Information contained on form HUD-52515 demonstrates that the project is responsive to the condition of the housing stock in the community and the housing assistance needs of low income families (including large families and those displaced) residing in or expected to reside in the community.	~	~	~	~
(e)	The form HUD-52515 indicates that the applicant qualifies as a PHA and is legally qualified and authorized to participate in the Section 8 programs for the area in which the programs are to be carried out. Such demonstration includes: (i) The relevant enabling legislation, (ii) any rules and regulations adopted or to be adopted by the PHA to govern its operations, and (iii) a supporting opinion from PHA counsel. (Check YES if documents are currently on file in the local HUD Field Office.)	~	~	~	~
(f)	The form HUD-52515 indicates that the housing quality standards (HQS) to be used in the operation of the program will be as set forth in 24 CFR 982.401 or that variations in the Acceptability Criteria are proposed or have been approved by the local HUD Field Office. In the latter case, each proposed variation shall be specified and justified.	~	~	~	~
(g)	The form HUD-52515 includes estimates of the average adjusted income of prospective participants for each bedroom size.	~	~	~	~
(h)	The form HUD-52515 includes an executed certification regarding Equal Opportunity, Lobbying, and Drug-Free Workplace Requirements. The application meets HUD's drug-free workplace requirements set out at 24 CFR part 24, subpart F, and HUD's regulations regarding anti-lobbying set out at 24 CFR 87. If warranted, the PHA has completed and submitted SF-LLL, Disclosure Form to Report Lobbying.	~	~	~	~

NAME OF APPLICANT _____

<p style="text-align: center;">PART 2</p> <p style="text-align: center;">ADDITIONAL SCREENING CRITERIA</p> <p style="text-align: center;">(To be completed by Office of Public Housing)</p>		YES	NO	N/A	Need Info.
<p>3. In reviewing the application, the local HUD Field Office agrees that:</p>					
<p>(i)</p>	<p>The application package includes in the letter of intent and narrative section of its application a statement by the PHA indicating whether the PHA will accept a smaller number of vouchers and the minimum number of vouchers it will accept.</p>	~	~	~	~
<p>(j)</p>	<p>The PHA's application included a copy of the HUD approval letter for a designated housing plan that was previously approved contingent upon the PHA's future submission of an application for Section 8 vouchers as an alternative housing resource for non-elderly disabled families.</p>	~	~	~	~
<p>(k)</p>	<p>(This review checklist item is to be used and filled out solely by the Special Application Center.) The PHA's application includes an approvable designated housing plan, or a designated housing plan previously approved by HUD that did not require Section 8 vouchers for non-elderly disable families or that now requires more Section 8 vouchers that previously justified, and the PHA has submitted a copy of the previously HUD-approved designated housing plan, and updated needs data supporting the need now for Section 8 vouchers not previously deemed necessary as an alternative housing resource. (The updated needs data should indicate why the PHA does not have the appropriate resources to carry out the previously approved plan, identify the number of Section 8 vouchers needed for non-elderly disable families, and address the housing needs in its consolidated plan.) The SAC approves of the updated needs data.</p>	~	~	~	~

NAME OF APPLICANT _____

☐ Pass - Continue Processing

☐ Fail - Identify
Deficiencies

Reviewer's Signature & Date

☐ Agree with Screening
Results

Supervisor's Signature & Date

**ANY CHANGE MADE TO THE INITIAL SCREENING CHECKLIST MUST BE EXPLAINED.
(E.G., MISSING OR CORRECTED INFORMATION WAS SUBSEQUENTLY RECEIVED
FROM THE PHA WITHIN THE ALLOWED 14 DAY PERIOD AND WAS DETERMINED
ACCEPTABLE).
INDICATE NAME AND TITLE OF INDIVIDUAL CHANGING THE CHECKLIST AND DATE
OF CHANGE.**

☐ Disagree/Change Screening
Results

Supervisor's Signature & Date

Explanation for change:

SAMPLE LETTER

Acknowledgment of
Application Receipt

U.S. Department of Housing
and Urban Development

Dear :

Subject: FY 1999 Rental Assistance for Non-Elderly Persons with Disabilities in
Support of Designated Housing Plans

(check appropriate box)

- ☐ HUD received your application by the deadline and will consider it for funding. In accordance with Section 103 of the Department of Housing and Urban Development Reform Act of 1989, HUD will not release any information regarding the relative standing of any applicant until funding announcements are made. The local HUD field office may contact you after the initial screening of your application to permit you to correct certain deficiencies allowed by the NOFA.
- ☐ HUD did not receive your application by the deadline required by the NOFA; therefore, your application will not receive further consideration.

Processor's Name _____

Date of Receipt _____

Sincerely,

Signature
Name and Title

APPENDIX C

Sample Technical Deficiency(s) Letter

Applicant
Address

Dear Applicant:

Thank you for your recent application submission for funding in connection with the FY 1999 Rental Assistance for Non-Elderly Persons with Disabilities in Support of Designated Housing Plans. The **(name of local field office)** has conducted the initial screening of your application. Your application was found technically deficient in the following area(s):

1. Identify the item, tab number, and reason deficient
- 2.
- 3.

Please provide additional information identified within **14 calendar days** from the date of this letter. Information received by the local HUD Field Office after 3 p.m. local time on the 14th calendar day will not be accepted and the application will be categorized as unacceptable for further processing (rejected). Please submit the missing information identified above to:

Name of Contact person:
Telephone Number:
Local Field Office:
Address:

TTY Number:

The Field Office will review the response(s) submitted by your housing agency to ensure that your response(s) corrects the deficiency(s) previously identified. If your response(s) does not address the deficiency(s) above, your application will not be considered for funding. You will be notified in writing that your application is ineligible.

If you have any questions, please contact **(insert name and telephone number)**.

Thank you for your interest in the Department's programs.

Sincerely,

Signature
Name and Title

Appendix D

Field Office Name: _____

RENTAL ASSISTANCE FOR NON-ELDERLY PERSONS WITH DISABILITIES IN SUPPORT OF DESIGNATED HOUSING PLANS INSTRUCTIONS FOR COMPLETING APPLICATION MASTERLOG

Each FOGA will receive a Microsoft EXCEL spreadsheet/MASTERLOG attachment via LOTUS NOTES.

By August 6, 1999, each FOGA is required to submit to the GMC, via LOTUS NOTES attachment, a Masterlog of all applications received. Complete only the shaded area for initial submission. Follow the same procedure for applications postmarked by, but received after the application deadline date.

Once the initial submission or submissions (to include postmarked applications received after deadline date) are made to the GMC, complete the entire Masterlog and submit to Brenda Earle or Donna Hines.

If you have any questions regarding the worksheet or instructions, please contact Donna Hines, MIS for GMC on 202/358-0221, ext. 131.

TO RETRIEVE MASTERLOG ATTACHMENT

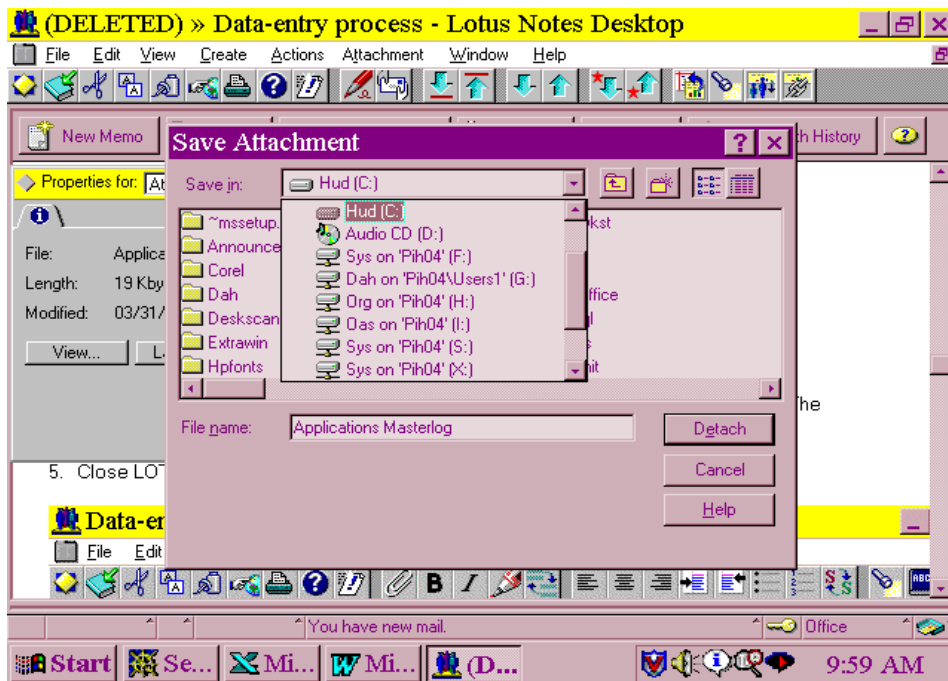
1. Open LOTUS NOTES file sent by GMC Grant Administrator
2. Double click on EXCEL icon to open.



Applications Masterlog.xls

3. Click on "Detach" in Properties Window
4. In "Save Attachment" window, select C: and click on "Detach" at bottom of page. The Masterlog is now saved to your C: drive as "Applications Masterlog."
5. Close LOTUS NOTES

GRAPHIC FOLLOWS ON NEXT PAGE



6. Open Microsoft EXCEL from desktop.
7. Once in EXCEL - Click on File (the "Applications Masterlog" file may appear in file listing at bottom). If it does, double click on "Applications Masterlog". If "Applications Masterlog" does not appear, choose OPEN. Select C drive. Locate "Applications Masterlog" and double click to open file.
8. Type in required data to Masterlog spreadsheet.
9. **SAVE - SAVE - SAVE YOUR WORK!** When data-entry is complete. Click on diskette icon or FILE/SAVE. Click on large "X" in right top corner of page to close out of EXCEL.

SENDING MASTERLOG TO THE GMC

1. Open LOTUS NOTES, address to GMC Grant Administrator and MIS. Include name of program in Subject line (i.e., Rental Assistance Masterlog).
2. Move to the body of the memo and Click on "Paper Clip" icon.
3. Select C: drive in "Create Attachment" window.
4. Locate the "Applications Masterlog" file, highlight and choose "Create". The file attachment will appear within the LOTUS NOTE.
5. Send/File
6. Repeat these steps to send updated Masterlogs to the GMC.

MASTERLOG - APPLICATIONS RECEIVED

§ 8 DESIGNATED HOUSING

FIELD
OFFICE: _____

FIELD OFFICE
CODE: _____

	HA CODE	Applicant Name	NO. of Vouchers	Eligible Yes/No	Deficient Yes/ NO	Date Deficient Letter Sent	Reason for Rejection	Logged In By
1		SAMPLE						
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								

APPENDIX E

INSTRUCTIONS FOR COMPLETING RENTAL ASSISTANCE FOR NON-ELDERLY PERSONS WITH DISABILITIES IN SUPPORT OF DESIGNATED HOUSING PLANS FUND RESERVATION WORKSHEET

Summary

The Funding Reservation Worksheet is prepared to provide essential applicant information necessary for data maintenance, tracking and reporting purposes, and to calculate the budget authority necessary to fund units for approved Section 8 applications.

APPLICANT DATA

- **Program:** Section 8 vouchers program.
- **Field Office:** Field Office where application was submitted
- **Housing Authority (HA):** Agency to administer assistance.
- **HA Code:** (i.e., MA001)
- **Housing Authority Address:**
City, State, Zip
- **Congressional District:**
- **Local FO Contact/Title/Phone**
- **Purpose:** Funding Category, i.e., Designated Housing Plan.
- **FMR Area:** Published Fair Market Rent (FMR) locality.
- **Program Size:** Enter the total number of certificates and vouchers that the HA administers. Use the HUDCAPS Unit Distribution Report.
- **FMR Administrative Fee Factors:** Enter the FMR administrative fee factors in columns "A" and "B", as published in the Federal Register on March 12, 1999, Annual Factors for Determining PHA Administrative Fees for Section 8 Programs. These factors along with the program size are required to determine the ongoing administrative fee.
- **Units Requested:**
- **Minimum Units Accepted:**

FUNDING RESERVATION WORKSHEET CALCULATIONS

Line 1: Fair Market Rents (FMRs)

- Enter the FMRs as published in the Federal Register on October 1, 1998.

Line 2: 95 Percent of FMR

- o The worksheet formula will automatically calculate 95 percent of the FMRs entered on line 1.

Line 3: Average Total Tenant Payment (ATTP)

- o Enter the HA's average tenant payment by bedroom size where applicable. In Section C of the HUD Form 52515, the HA provides the average monthly adjusted income by bedroom size by program. Be sure to multiply the average monthly adjusted income by 30% to determine the ATTP by bedroom size.

Line 4: First Year HAP

- o The worksheet formula will automatically calculate the first year HAP.

Line 5: On-going Administrative Fee

- o The worksheet formula will automatically calculate the administrative fee once the FMR administrative fee factors and the program size are entered.
- o With the exception of first-time PHAs, the Section 8 funding provided does not include a preliminary fee since these fees were eliminated by the Quality Housing and Work Responsibility Act of 1998.

Line 6: Hard-to-House Fee

- o A hard-to-house fee of \$9 is added, based on the assumption that 20 percent of the units will qualify for the hard-to-house fee.

Line 7: Total Administrative Fee

- o The worksheet formula will automatically add both the on-going administrative fee and the hard-to-house fee.

Line 8: Unit Distribution

- o Enter the number of units requested by bedroom size.

Line 9: Contract Authority

- o The worksheet formula will automatically calculate line 4 plus line 7 and multiplies the product by the unit distribution on line 8.

Line 10: Budget Authority

- Since the contract term is one year, budget authority is equal to the contract authority.

APPLICANT DATA

PROGRAM: _____

FIELD OFFICE: _____

FIELD OFFICE CODE: _____

PURPOSE: _____

FMR AREA: _____

PUBLIC HOUSING AUTHORITY: _____

HA CODE: _____

ADDRESS: _____

PROGRAM SIZE: _____

FMR ADMIN. FEE: A: _____

B: _____

CITY, STATE, ZIP _____

CONGRESSIONAL DISTRICT: _____

UNITS REQUESTED: _____

MINIMUM UNITS ACCEPTD: _____

:

:

LOCAL FO CONTACT/TITLE: _____

PHONE: _____

FUNDING RESERVATION WORKSHEET

UNIT BEDROOM SIZE	0 BR/EFF	1 BR	2 BR	3 BR	4 BR	5 BR	6 BR	TOTAL
1. FAIR MARKET RENT	0	0	0	0	0	0	0	
2. 95% OF FAIR MARKET RENT	0	0	0	0	0	0	0	
3. AVERAGE TENANT PAYMENT	0	0	0	0	0	0	0	
4. FIRST YEAR HAP ((LN 2 - LN 3) X 12)	0	0	0	0	0	0	0	
5. FMR ADMIN FEE	0	0	0	0	0	0	0	
6. HARD-TO-HOUSE FEE	9	9	9	9	9	9	9	
7. TOTAL ADMIN FEE (LN 5 + LN 6)	9	9	9	9	9	9	9	
8. UNIT DISTRIBUTION	0	0	0	0	0	0	0	0
9. CONTRACT AUTHORITY ((LN 4 + LN 7) X LN 8)	0	0	0	0	0	0	0	0
10. BUDGET AUTHORITY (LN 9 X 1)								0

APPENDIX F

Instructions for Computing Lease-Up-Rate For the Combined Certificate and Voucher Program

To be eligible for funding under the March 8, 1999 Rental Assistance for Non-Elderly Persons With Disabilities in Support of Designated Housing Plans NOFA, the leasing rate of a PHA for the total number of units in its combined Section 8 certificate and voucher programs must be at least 90 percent of the units in the PHA's HUD-approved budget for the LAST completed PHA fiscal year prior to this application funding.

The 90 percent rate is computed for the TOTAL of the combined certificate and voucher programs, not for each program separately.

The term "prior to this application funding" in the NOFA means prior to the publication date of the NOFA - i.e., the LAST FY end before March 8, 1999. For a PHA with a FY ending on December 31, the prior FY used for calculating the leasing rate would be from January 1, 1998 through December 31, 1998. For a PHA with a FY ending on March 31 the leasing rate would be calculated using reports for the period from April 1, 1997 to March 31, 1998.

The leasing rate will be calculated by dividing the total certificate/voucher unit months under lease from the PHA's year-end settlements (HUD-52681) for the appropriate period by 12 to determine the number of certificate/voucher units under lease. The total certificate/voucher units under lease will then be divided by the total number of certificate/voucher units in the PHA-approved budgets for the same PHA fiscal year to determine the leasing rate.

Actual unit months leased for the appropriate FY for this leasing rate calculation are found in HUDCAPS on the Year End Settlement Table (YEST), on the Program Information Tab; it identifies total months leased as reported by the PHA on its year-end settlement, form HUD-52681. Since the information is reported in HUDCAPS separately for Section 8 certificates and vouchers, the certificate and voucher unit months leased will have to be added together before proceeding with the calculation.

The budgeted units, the number of units in the HUD-approved budget for the same PHA fiscal year needed for the leasing rate calculation, are found on the Budgeted Units Distribution Table (BDGT); it identifies the number of units by bedroom size

that the PHA has included in its FY budget (form HUD-52673) and it also includes the date it was last updated. Since the information is reported in HUDCAPS separately for Section 8 certificates and vouchers, the budgeted units for certificates and vouchers will have to be added together before proceeding with the calculation.

If the PHA's total certificate/voucher leasing rate calculated using information from HUDCAPS is less than 90 percent, FO staff must determine whether the HUDCAPS information is from the initial HUD-approved budget for the FY. The FO should contact the PHA to confirm the number of budgeted units in the PHA's initial HUD-approved budget for the appropriate FY. If the numbers the FO obtains from the PHA at that time are different from those in HUDCAPS, the FO must obtain from the PHA a copy of the PHA's initial HUD-approved budget for the appropriate FY. If the PHA does not have the budget information the FO is requesting, the information may be obtained from the Section 8 Financial Management Center (S8FMC). If requested by the FO, the S8FMC division director serving the FO will provide the number of budgeted units and a copy of the PHA's initial HUD-approved budget for the appropriate FY.

If the FO determines that the HUDCAPS data used to calculate the leasing rate of an HA that has failed to meet the 90 percent leasing threshold was from a budget revision rather than the PHA's initial HUD-approved budget for the appropriate period, the FO MUST recompute the leasing rate of the HA using the number of budgeted units in the PHA's initial budget to recalculate the PHA's leasing rate for the appropriate period.